



APPLICATION FOR CHANGE/TRANSFERTERN REGIONAL OFFICE OF WATER RIGHT

For filing with the Department of Ecology or with County Conservancy Boards

A NON-REFUNDABLE MINIMUM FEE OF \$50.00 PAYABLE TO THE DEPARTMENT OF ECOLOGY MUST ACCOMPANY THIS APPLICATION

ECY Coding: 001-002-WR1 SEPA: Exempt Columbia: Con IEETS (PLEASE PRINT OR PHONE NO. (509) 382-4822 STATE WA PHONE NO. (509) 382-3165	Not exempt
PHONE NO. STATE WA PHONE NO.	FAX NO. () ZIP CODE 99328
PHONE NO. (509) 382-4822 STATE WA PHONE NO.	FAX NO. () ZIP CODE 99328
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STATE WA	
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PHONE NO.	
PHONE NO.	
	FAX NO
1(303) 302-3103	()
STATE WA	ZIP CODE 99328
consistent, historical u	h se of water since the right nclude a copy with your
W. V.	GE NO
	sconsistent, historical u

3. Point(s) of Diversion/Withdrawal:

A. Existing

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
Lot 7 of blk C of Nustard's Addition		NW	SW	30	10	39	1-130-11-007-0000	
R Proposed	C	ert.	5045	NW14	SE/4	Sec	. 32	

B. Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
1/2 of water right from		NW	SW	30	10	39		
Lot 7 to Lot 8		1		29 F	per dee	d + phon	ne conv. W/Kathy	8-29 \$1

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: YES X NO PROPOSED:

YES □ NO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

4. Purpose of Use:

A Evieting

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigate lawn and garden	4.5 gpm		April 15 thru September 15
	1,00000		

B. Proposed

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
Irrigate lawn and garden	2.25 gpm	0,005ch	April 15 thru September 15
	Per lett	er nevd 8-	27-2008

5. Place of Use:

A Fxisting

		LEG	GAL DESCR	RIPTION OF	LANDS WHERE WATER IS	PRESENTLY USED:	
Lot	7 Block C	of Nustan	d's Addit	cion to D	ayton, Washington		
			1				
			,		Y'.		and the same of
		77		7,6			
		T	TAID	RGE.	COUNTY	PARCEL#	# OF ACDEO
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	FAILOLL#	# OF ACRES
1/4 NW	1/4 SW	SEC.	10	39	Columbia	1-130-11-007-0000	.25

R Proposed

		14 11 11	LEGAL DE	SCRIPTION	OF LANDS WHERE NEW U	SE IS PROPOSED:	
SELY 1	O' of Lo	t 9 ALL o	f Lot 8 B	lock C of	Nustards Addition to	Dayton, Washington.	
1/	14	SEC	TMP	PGE	COUNTY	PARCEL #	# OF ACRES
1/4 NW	7/4 SW	SEC.	TWP.	RGE.	Columbia	PARCEL# 1-130-11-008-0000	# OF ACRES

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

☐ YES ☐ NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S):

	arks and Other Relevant Information:
	ater right was historically used to benefit Lots 7 from the eastend ditch. It is now
being	enclosed in a pipe. I have used the water for years to benefit Lot 8, pumped from the
	. Charles Lewis owner of Lot 7, has agreed to transfer 1/2 of his water right to me and
T WII	1 connect the new East end pipe to obtain water to benefit Lot 8.
FOR SEA	SONAL OR TEMPORARY, START DATE/END DATE/
Reven	pplications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Departm ue has requested notification of potential taxable water right related actions and therefore may be provi py of this request.
	ntact the State Department of Revenue for further information. The phone number is (360) 570-3265. ess is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477.
Sign	atures:
order Conse prepa	ify that the information above is true and accurate to the best of my knowledge. I understand that is to process my application, I am hereby granting staff from the Department of Ecology or the Countervancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the aration of the above application, I understand that all responsibility for the accuracy of the information me. Start Grant Gr
	(Marke Seller (Date) (Water Right Holder) (Date)
	(Land Owner(s) of Existing Place of Use) (Date) (Date)
	Reggie MACE Heather MACE 1015 6 T ST DAY ton, h
Transport of the last of the l	ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):
WE A	
ł	PPLICATION FEE NOT ENCLOSED MAP NOT INCLUDED or INCOMPLETE
□ AF	
□ AF	PPLICATION FEE NOT ENCLOSED MAP NOT INCLUDED or INCOMPLETE

ATTACHMENT FOR APPLICATION FOR CHANGE

	SOURCE						sting		osed:	
	SOUNCE		NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
								- 4		
			+			-	-			
			+			-				
								□ NO – IF I	NO, PROVIDE OWNER	(S) NAME:
urpos	se(s) of	Use -		Existi		Propos GPM or CF		RE-FT/YR	DERION	OE USE
	PURP	USE OF US	35		\dashv	GPIN OF CE	ACF	CE-FI/IK	PERIOD (UF USE
	1 T -1			A						
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Place (of Use -	- 🗆 Ex	disting			osed: DESCRIPT	ON OF LA	ANDS		
Place	of Use -	- <u>E</u> x	kisting				ON OF LA	ANDS		
Place	of Use -	- 🗆 Ex	kisting				ON OF LA	ANDS		
Place	of Use	- 🗆 Ex	kisting				ON OF LA	ANDS		
Place	of Use	- Ex	kisting				ON OF LA	INDS		

If you require this document in an alternate format, please contact the Water Resources Program at (360) 407-6600 or TTY (for the speech or hearing impaired) at 711 or 1-800-833-6388.